



14th Annual
**INDIANA REGIONAL
BRAILLE CHALLENGE**

Where: ISBVI

When: February 25, 2022

Sponsored by Indiana School for the Blind and Visually Impaired

Must be signed by parental/legal guardian and returned by January 28, 2022 to ISBVI, 7725 N College Ave, Indianapolis, IN 46240, by email to THughes@isbvik12.org or TSanders@isbvik12.org. Or by fax to Attn: Toni Hughes or Tiffany Sanders at (317) 259-4945. For questions, contact (317) 253-1481 ext. 221 or ext. 100. Only contests submitted with a signed permission form attached will be eligible for the Braille Challenge® Finals at Braille Institute®.

Please print legal name clearly and fill out completely

* Required fields

* Last Name _____ * First Name _____

* Address _____ Apt. No. _____

* City _____ * State _____ * ZIP _____

* Birthdate _____ * Age _____ * Grade _____ * Gender: ☐ Male ☐ Female ☐ Decline to Answer

* E-mail _____ * Telephone _____

DEVICE CHECKLIST

Do you have a Braille?	Yes	No	How many?
Do you have a Bookport?	Yes	No	How many?
Do you have an SD card?	Yes	No	How many?

Student's T-Shirt	Youth:	<input type="radio"/> X-Small	<input type="radio"/> Small	<input type="radio"/> Medium	<input type="radio"/> Large		
Size	Adult:	<input type="radio"/> Small	<input type="radio"/> Medium	<input type="radio"/> Large	<input type="radio"/> XL	<input type="radio"/> XXL	<input type="radio"/> XXXL

Adult attending with student (if applicable) _____ ☐ TVI ☐ Parent ☐ Para

CONTINUED ON NEXT PAGE

TO BE COMPLETED BY TEACHER OF THE VISUALLY IMPAIRED (Please fill out completely)

Name of Teacher of the Visually Impaired _____

Teacher's Email _____ Teacher's Phone _____

Regional Coordinator Name (if applicable) _____

Mark one. Note: all contests are in UEB format only.

Student Contest Level: ☐ App ☐ Fresh ☐ Soph ☐ JV ☐ Varsity
 Grades 1–2 Grades 3–4 Grades 5–6 Grades 7–9 Grades 10–12

☐ At Grade Level Or ☐ Below Grade Level (BGL) *(If Apprentice BGL: ☐ Contracted Or ☐ Uncontracted)

*Students who take a contest below their academic grade level in school or who take the uncontracted Apprentice contest are not eligible to attend the Finals.

Remember to Keep Calm and Braille On!

PERMISSION STATEMENT AND LIABILITY/PHOTOGRAPHIC RELEASE

I hereby give permission for my child to participate in all Braille Challenge events including the regional preliminary contest and, if eligible, the final contest and awards ceremony in Los Angeles, CA. In consideration of Braille Institute permitting my child to participate in Braille Challenge events, I, on behalf of myself, my child, our heirs, successors or assigns, hereby waive and release, and agree to indemnify and hold harmless, Braille Institute of America, Inc., its employees, officers, directors, volunteers and agents, including regional coordinators (collectively "BIA Parties") from, any and all claims, including claims of negligence, resulting in any physical or psychological injury, illness, damages, or economic or emotional loss, arising from or related to my child's participation in any Braille Challenge event.

I authorize BIA Parties to photograph, videotape, or otherwise record by visual, audio, electronic or manual means, the visual likeness and/or voice or other sounds created by my child (collectively "Reproductions"). BIA Parties may use or permit to be used in furtherance of Braille Institute's mission the Reproductions in any CD, DVD, exhibition, display, publication, solicitation or promotional or educational material or on any website, including without limitation Braille Institute's website or social media channels, without compensation to my child, my child's heirs, successors or assigns.

COVID-19: I understand that my child's participation in person in any Braille Challenge event may be conditioned upon my child's compliance with certain safety precautions, including without limitation the satisfactory completion of a health questionnaire, the wearing of a face covering and maintenance of specified social distancing.

Child's Name _____

Parent/Guardian Signature _____

Parent/Guardian Print Name _____

Date _____

Remember to Keep Calm and Braille On!